

COUNTY OF LOS ANGELES –DEPARTMENT OF PUBLIC HEALTH  
ALCOHOL AND DRUG PROGRAM ADMINISTRATION

Prevention Planning Meeting - October 8, 2009

Service Planning Areas 3, 7, & 9 Regional Work Group Responses	
1. What are the alcohol and other drug (AOD) problems specifically affecting your community?	<ul style="list-style-type: none"> <li>○ Underage drinking</li> <li>○ Beer/alcohol consumption, especially among girls</li> <li>○ Inhalant abuse among middle and high school students</li> <li>○ Marijuana use</li> <li>○ Ecstasy abuse among middle school children</li> <li>○ Over-the-counter drug and prescription drug misuse at home and parties</li> <li>○ Yellow trumpet flowers to make tea/hell's bells</li> <li>○ Noz (gas inhalants) abuse among middle and high school children</li> <li>○ Energy drinks using the same name "Noz"</li> <li>○ On campus marijuana possession and use</li> <li>○ Meth use (snorting) among girls for weight loss, concealing</li> <li>○ Steroid use for athletic purposes</li> <li>○ PCP use among 25-35 age group</li> </ul> <p><i>Contributing Factors (Social/culture/norms, school, parenting, policies)</i></p> <ul style="list-style-type: none"> <li>○ Youth culture and advanced communication techniques (texting) make it harder for adults to detect youth drinking and drug use (Kick-back parties)</li> <li>○ Social acceptance of marijuana</li> <li>○ Movies that promote marijuana use</li> <li>○ Lack of training for school staff to identify students' AOD use</li> <li>○ AOD use leads to an increase school drop-out rate and vice versa</li> <li>○ Parents allowing children to drink in parties among Latino and African-American families</li> <li>○ Children and youth unsupervised at home. Parents unaware of children/youth AOD use</li> <li>○ Lack of consequences for marijuana possession</li> <li>○ Easy access to drug paraphernalia</li> <li>○ Lack of policies and policy enforcement</li> </ul>
2. How do you know it's a problem?	<ul style="list-style-type: none"> <li>○ California Healthy Kid Survey data</li> <li>○ Focus groups</li> <li>○ Participants self reporting to prevention staff</li> <li>○ Records, data, interviews, surveys</li> </ul>

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2. Continued	<ul style="list-style-type: none"> <li>○ Referrals from schools, courts, probation, correctional facilities</li> <li>○ Phone calls from clients for referrals and information</li> <li>○ Parents, neighborhood watch, faith-based organization</li> <li>○ Individuals in neighborhood providing information and observation</li> <li>○ Coalition</li> <li>○ College students who study about AOD data</li> <li>○ Detention and arrest rate data</li> <li>○ County/city data info</li> </ul>
3. What types of conditions or risk factors in your community contribute to these problems? (Risk factors which increases the chance of a problem's occurrence)	<ul style="list-style-type: none"> <li>○ Saturation of alcohol outlets</li> <li>○ Easy accessibility to and availability of alcohol</li> <li>○ Social host and availability of AOD in social settings for general population</li> <li>○ Perception of use</li> <li>○ Service providers lack of cultural competence and proficiency</li> <li>○ Organized crimes</li> <li>○ Lack of jobs, resources, self-sustained ability</li> <li>○ Easy accessibility</li> <li>○ Lack of parental supervision</li> <li>○ Lack of leisure activities</li> <li>○ Pop culture</li> <li>○ Media/ads promoting use</li> <li>○ Intergenerational conflict, especially in immigrants</li> <li>○ Hopelessness , no sense of future</li> <li>○ Lack of supervision in skate parks</li> <li>○ Lack of family strengthening/protective factors</li> <li>○ Lack of alcohol policies and enforcement especially in special/social events</li> <li>○ Lack of affordable child care/after school care for middle/lower class families</li> <li>○ Inadequate service providers with linguistic and language competence to address problems</li> <li>○ Lack of community attachment</li> <li>○ Cultural norms promote drinking</li> <li>○ Lack of role models, mentors</li> <li>○ Lack of collaboration between schools, communities to provide services</li> <li>○ Lack of comprehensive approaches to prevention</li> <li>○ Lack of mental health support</li> <li>○ Teachers not engaging their students, especially underperforming students</li> <li>○ Lack of connection/communication between youth and adults (elderly adults)</li> <li>○ Lack of research at the local level to understand and address problems</li> <li>○ Lack of support from government to provide evidence-based prevention services</li> </ul>

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	<ul style="list-style-type: none"> <li>o History of family AOD use</li> <li>o Lack of meaningful relationships among people, places and things</li> </ul>
4. What types of community actions/programs already exist to prevent/reduce these problems?	<ul style="list-style-type: none"> <li>o Peer advocacy prevention</li> <li>o Low cost transportation</li> <li>o Red ribbon camps</li> <li>o Effective afterschool programs/alternative activities</li> <li>o Organized family outings/family group activities</li> <li>o Mentoring</li> <li>o Citywide activities/efforts to include community members</li> <li>o Bilingual/bicultural services</li> <li>o Promotion of family dinner/activities</li> <li>o AOD Educational services to elementary/ middle school/high school students</li> <li>o Peer mentoring/intensive peer groups</li> <li>o Youth leadership development</li> <li>o Family garden/community project/interagency family projects</li> <li>o Utilizing former users to provide info on past experience on the negative effect of AOD and promoting the "Do not try" message</li> <li>o AOD free community events to promote community attachment</li> <li>o On campus provision of mental health support and assessment for referrals</li> </ul>
5. Among the most serious problems, which three problems should be addressed first in consideration of available resources and community activities/programs	<ul style="list-style-type: none"> <li>o Alcohol consumption – Underage and 17-24 college-age groups</li> <li>o Marijuana</li> <li>o Methamphetamine</li> </ul> <p>Current perception and attitudes on the above three AOD problems need to be addressed through integrated policy, education, training and advocacy that is culturally and linguistically appropriate.</p>
6. What type of evidence-based strategies should be considered for addressing alcohol and other drug problems?	<ul style="list-style-type: none"> <li>o Contingency management</li> <li>o Community mobilization</li> <li>o Five A's program: Ask, Advice, Assess, Assist, Arrange</li> <li>o Brief motivational interviews</li> <li>o Mentoring programs</li> </ul>
7. What are some key concepts and principles that should be considered for designing a prevention Request for Proposal (RFP) program design?	<ul style="list-style-type: none"> <li>o Community capacity</li> <li>o Community partnership and collaboration</li> <li>o Mandatory training</li> <li>o Experience in prevention field</li> </ul>

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7. Continued	<ul style="list-style-type: none"> <li>○ Agencies previous receiving ADPA funding</li> <li>○ Agencies with documented history of effectiveness</li> <li>○ Agencies with policy accomplishments</li> <li>○ Agencies with competent staff both culturally and linguistically</li> <li>○ Flexible evaluation design</li> </ul>
8. What tools may assist your organization with preparing for the RFP process?	<ul style="list-style-type: none"> <li>○ County provides Questions and Answers sessions</li> <li>○ Guidance through ADPA staff</li> <li>○ Grant writing workshops</li> <li>○ Access to what evidence-based programs are</li> <li>○ Sample RFPs</li> <li>○ Availability of local data and research</li> <li>○ Adequate timeline from grant announcement and due date (minimum 30 days)</li> <li>○ Allowing for electronic submission</li> <li>○ Request Letters of Intent</li> <li>○ Restricting application eligibility to allow only organizations located in Los Angeles county to apply</li> <li>○ Consider overhead cost and indirect cost category to be included in the RFP.</li> </ul>

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